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l	JTILITY	A	ttorne	y Docket No.	590	57 .	
PATENT APPLICATION			First Inventor Edward B. Standish			andish	
TRA	NSMITTAL	7	tle	Tooth Extra	ction	Device	
(Only for new nonprovision	nal applications under 37 CFR 1.53(l)) E	xpres	s Mail Label N	o. E	:U4723572	26US
}	TION ELEMENTS		ADE	PRESS TO:	Box F	Patent Applicat	
	ceming utility patent application conte orm (e.g., PTO/SB/17)	ents	7.	CD-ROM or C		hington, DC 20 dunlicate, laro	
1. Submit an original and a Applicant claims s See 37 CFR 1.27.			8. Nu	Computer Pro	gram (/ nino Ac	Appendix) id Sequence S	
3. X Specification (preferred arrangement)	(Total Pages 21)		(<i>if</i> a. (applicable, all nec Computer R) e Form (CRF)	
	of the invention e to Related Applications		b.	Specification Seq	uence l	Listing on:	
- Statement Rega	arding Fed sponsored R & D			i. 🗌 CD-F	ROM or	CD-R (2 copie	es); or
	equence listing, a table, program listing appendix			ii. 🗌 pape	r		
- Background of	the Invention		c.	Statements	verifyin	g identity of ab	ove copies
- Brief Summary - Brief Descriptio	of the Invention in of the Drawings (if filed)			ACCOMPANY	ING A	PPLICATION	ON PARTS
 Detailed Descri 			9. [Assignment F	apers	(cover sheet &	document(s))
- Claim(s) - Abstract of the	Disclosure		10.	37 CFR 3.73 (when there			Power of Attorney
4. X Drawing(s) (35 U	.S.C. 113) [Total Sheets 7	_ _}	11.	-		Document (if a	· · - · · · · ·
5. Oath or Declaration [Total Pages 2]				X Information (III			Copies of IDS Citations
a. X Newly execu	uted (original or copy)		13.	Preliminary /			•
b. Copy from a prior application (37 CFR 1.63 (d)) b. (for continuation/divisional with Box 18 completed) 14. X Return Receipt Postcard (MPEP 503) (Should be specifically itemized)				503)			
i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s)			15. Certified Copy of Priority Document(s) (if foreign priority is claimed)				
named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b)			16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35				
6. Application Data	6. Application Data Sheet. See 37 CFR 1.76 or its equivalent. Other:						
	CATION, check appropriate box, and	d supply i	he requ	uisite information b	elow a	nd in a prelimi	nary amendment,
or in an Application Data She	eet under 37 CFR 1.76: Divisional Continuation-in-part	(CIB)		of prior application No.:		,	
Prior application information:	Examiner	(Cir)		Group Art Unit:		'	
For CONTINUATION OR DIVISI Box 5b, is considered a part o	ONAL APPS only: The entire disclosur f the disclosure of the accompanying o relled upon when a portion has been in	ontinuatio	n or di	lication, from which	and is	hereby incorpo	
	19. CORRESP					,	
Customar Number or Ber Co	ode Label Insen Customer A.			or .		Correspondence a	ddress below
Name	DALE J. REAM	242	30				,
	Harshaw Research haces	povete	dark c	FFICE		ļ	
Address	P.O. Box 418						
City	Ottawa	s	ate	KS		Zip Code	66067
Country	United States	Teleph	one	785-242-95	00	Fax	785-242-330
Name (Print/Type)	DALE J. REAM		Reg	istration No. (At	torneyi	(Agent) 45	,798

Signature

Date 7-8-03

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PTO/SB/17 (11-01)
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FEE TRANSMITTAL		Co	Complete if Known				
FEE INANG		Application Number					
for FY 2	2002	Filing Date					
Palent fees are subject to		First Named Inventor	Edward B. Standish				
		Examiner Name					
Applicant claims small entity status. See 37 CFR 1.27		Group Art Unit					
OTAL AMOUNT OF PAYMENT	(\$) 384.00	Attorney Docket No.	59057				

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)				
X Check Credit card Money Other None	3. ADDITIONAL FEES				
Deposit Account:	Large Entity Small Entity				
Deposit Country Deposit	Fee Fee Fe		Fee Description	Fee Paid	
Account Number	Code (\$) Co	ode (\$) 5 65	Surcharge - late filing fee or oath		
Deposit Account					
Name	127 50 22	7 25	Surcharge - late provisional filing fee or cover sheet		
The Commissioner is authorized to: (check all that apply)	139 130 13	9 130	Non-English specification		
Charge fee(s) indicated below Credit any overpayments	147 2,520 14	7 2,520	For filing a request for ex parte reexamination		
Charge any additional fee(s) during the pendency of this application Charge fee(s) indicated below, except for the filing fee	112 920 112	2 920°	Requesting publication of SIR prior to		
to the above identified deposit account.	113 1 040		Examiner action		
. FEE CALCULATION	113 1,840 113	3 1,840	Requesting publication of SIR after Examiner action	<u> </u>	
1. BASIC FILING FEE	115 110 21	5 55	Extension for reply within first month		
Large Entity Small Entity	116 400 21	6 200	Extension for reply within second month		
Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Paid	117 920 21		Extension for reply within third month		
101 740 201 370 Utility filling fee 375.00	118 1,440 21	8 720	Extension for reply within fourth month	 	
106 330 206 165 Design filing fee	128 1,960 22	8 980	Extension for reply within fifth month		
107 510 207 255 Plant filing fee	119 320 219		Notice of Appeal		
108 740 208 370 Reissue filing fee	120 320 22		Filing a brief in support of an appeal		
114 160 214 80 Provisional filing fee	121 280 22		Request for oral hearing		
SUBTOTAL (1) (\$) 375.00		8 1,510	Petition to institute a public use proceeding	<u> </u>	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	140 110 24 141 1,280 24		Petition to revive - unavoidable		
Fee from Extra Claims below Fee Paid	142 1,280 24		Petition to revive - unintentional Utility issue fee (or reissue)		
Total Claims 21 -20** = 1 x 9.00 = 9.00	143 460 24		Design issue fee		
Independent # - 3** = 0 x ==	144 620 244		Plant issue fee		
Multiple Dependent =	122 130 12	2 130	Petitions to the Commissioner		
	123 50 12	3 50	Processing fee under 37 CFR 1.17(q)		
Large Entity Small Entity Fee Fee	126 180 120	6 180	Submission of Information Disclosure Stmt		
Fee Fee Fee Fee <u>Fee Description</u> Code (\$) Code (\$)	581 40 58	1 40	Recording each patent assignment per		
103 18 203 9 Claims in excess of 20			property (times number of properties)		
102 84 202 42 Independent claims in excess of 3	146 740 24	6 370	Filing a submission after final rejection (37 CFR § 1.129(a))		
104 280 204 140 Multiple dependent claim, if not paid	149 740 24	9 370	For each additional invention to be		
109 84 209 42 ** Reissue independent claims over original patent		- 5.5	examined (37 CFR § 1.129(b))		
110 18 210 9 ** Reissue claims in excess of 20	179 740 27	9 370	Request for Continued Examination (RCE)		
and over original patent	169 900 16	9 900	Request for expedited examination of a design application		
SUBTOTAL (2) (\$) 9.00	Other fee (specify)				
``,	'Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)				
**or number previously paid, if greater, For Reissues, see above	ouccou by Da	raio i milă	TOUTING CONTOUNT (S) (TY)		

SUBMITTED BY Complete (if applicable)						
Name (PrintiType)	₽ALE J. REAM	Registration No. (Attorney/Agent) 45,798	Telephone	785-242-9500		
Signature	Lase Dear	~	Date	7-8-03		

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